Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	=	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture	Karen First name  L. Middle name  Carter		First name  Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	•	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3734		

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)
	doing business as names	EINs	EINs
5.	Where you live	19410 Archer St.	If Debtor 2 lives at a different address:
		Detroit, MI 48219  Number, Street, City, State & ZIP Code  Wayne	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

page 2

Deb	otor 1 Karen L. Carter				Case number (if known)	
Par	t 2: Tell the Court About	our Bankruptcy C	ase			
7.	The chapter of the Bankruptcy Code you are			f each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankr e box.	ruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how y	ou may pay. Typic r attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or ch	r money
				<b>Ilments.</b> If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals	to Pay
		☐ I request th	at my fee be waiv	red (You may request this option	n only if you are filing for Chapter 7. By law, a jud	
		applies to ye	our family size and	you are unable to pay the fee in	our income is less than 150% of the official poverty in installments). If you choose this option, you must cial Form 103B) and file it with your petition.	
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		District	·	When	Case number	
		District	: 	When	Case number	
		District	·	When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being	_				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debtor			Relationship to you	
		District		When	Case number, if known	
		Debtor			Relationship to you	
		District	:	When	Case number, if known	
11.	Do you rent your	□ No. Go to	line 12.			
	residence?		our landlord obtair	ned an eviction judgment agains	st you?	
		erres.	No. Go to line 12		,	
			Yes. Fill out <i>Initia</i> bankruptcy petiti		Judgment Against You (Form 101A) and file it with	h this

)eb	tor 1 Karen L. Carter			Case number (if known)
ar	Report About Any Bu	ısinesses	You Own	as a Sole Proprietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.
	business:	☐ Yes.	Name	and location of business
	A sole proprietorship is a	00.		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code
	it to this petition.		Check	k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1)(B).
	For a definition of <i>small</i>	■ No.	I am r	not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any Property That Needs Immediate Attention
4.	Do you own or have any	■ No.	·	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is	the hazard?
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?
	•			Number, Street, City, State & Zip Code
_				

Debtor 1 Karen L. Carter

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

## **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Karen L. Carter			Case nur	mber (if known)
Par	t 6: Answer These Questi	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are conal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		usiness debts? Business debts are de estment or through the operation of the	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you o	we that are not consumer debts or business	iness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be av	Do you estimate that after any exempt ρ ailable to distribute to unsecured credit	property is excluded and administrative expenses ors?
	are paid that funds will		No		
	be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	□ 1-49		<b>1</b> ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	<b>50-99</b>		<b>5001-10,000</b>	<b>5</b> 0,001-100,000
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000
19.	How much do you	<b>\$0 - \$</b>	50.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	□ \$0 - \$ <i>t</i>	50 000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	to be:		001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	D More than \$50 pillion
Par	Sign Below				
For	you	I have ex	amined this petition, and I dec	clare under penalty of perjury that the in	formation provided is true and correct.
				, I am aware that I may proceed, if eligi elief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				not pay or agree to pay someone who is e notice required by 11 U.S.C. § 342(b)	
		I request	relief in accordance with the c	chapter of title 11, United States Code,	specified in this petition.
		bankrupto and 3571	cy case can result in fines up t		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Karen L	n L. Carter Carter e of Debtor 1	Signature of De	ebtor 2
		Executed	on <b>July 1, 2019</b>	Executed on _	ANA / DD / NAVA
			MM / DD / YYYY		MM / DD / YYYY

Debtor 1	Karen L. Carter	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kenneth S. Sebree Signature of Attorney for De	ebtor	Date	July 1, 2019 MM / DD / YYYY
Kenneth S. Sebree P65	5523		
Kenneth S. Sebree, P.O	C.		
Guardian Building 500 Griswold, Suite 35	50		
Detroit, MI 48226			
Number, Street, City, State & ZIP Co	ode		
Contact phone (313) 963-9	<b>866</b> Ema	ail address	atty.sebree@sbcglobal.net
P65523 MI			
Bar number & State			

Fill	in this information to	identify your	case:				
Deb		n L. Carter					
Deh	First Na	me	Middle Name	Last Name			
	use if, filing) First Na	me	Middle Name	Last Name			
Unit	ed States Bankruptcy	Court for the:	EASTERN DISTRICT	OF MICHIGAN			
Cas						Chook	if this is an
(II KIII	JW11)					_	if this is an ed filing
	icial Form 10	_					
				and Certain Statistic			2/15
infor	mation. Fill out all of	your schedule	es first; then complete	le are filing together, both are the information on this form. I	If you are filing amend		
			new S <i>ummary</i> and che	ck the box at the top of this pa	age.		
Part	1: Summarize Yo	ur Assets					
						Your as: Value of	sets what you own
1.	Schedule A/B: Prop					\$	0.00
	• •					Ψ	
			•	3		<b>\$</b>	16,622.00
	1c. Copy line 63, Tot	al of all property	on Schedule A/B			\$	16,622.00
Part	2: Summarize Yo	ur Liabilities					
						Your lia	<b>bilities</b> you owe
2.			aims Secured by Proper mn A, Amount of claim, a	ty (Official Form 106D)  It the bottom of the last page of l	Part 1 of Schedule D	\$	18,111.00
3.			Unsecured Claims (Offic 1 (priority unsecured clai	ial Form 106E/F) ms) from line 6e of <i>Schedule E/</i>	/F	\$	0.00
	3b. Copy the total cla	aims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule	: E/F	\$	110,761.89
					Your total liabilities	\$	128,872.89
Part	3: Summarize Yo	ur Income and	Expenses				
4.	Schedule I: Your Inco			ile I		\$	1,405.73
5.	Schedule J: Your Exp Copy your monthly e.					\$	2,358.00
Part	4: Answer These	Questions for	Administrative and Sta	atistical Records			
6.			er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this f	form to the court with yo	ur other sche	edules.
7.	Yes What kind of debt d	o you have?					
	■ Your debts are	primarily cons	sumer debts. Consume	r debts are those "incurred by ar	n individual primarily for	a personal, f	amily, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,027.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Jeb	tor 1	Karen L. Carter First Name Middle	a Norma		
Deb	tor 2	First Name Middi	e Name Last Name		
Spou	se, if filing)	First Name Middle	e Name Last Name		
Jnite	ed States Bank	cruptcy Court for the: EASTERN	DISTRICT OF MICHIGAN		
Case	e number				☐ Check if this is a amended filing
		m 106A/B			
)C	hedule	A/B: Property			12/15
Do	you own or ha	, , ,	any residence, building, land, or similar property?		
	☐ Yes. Whe	ere is the property?			
.1			What is the property? Check all that apply  ☐ Single-family home		ured claims or exemptions. Put secured claims on Schedule D:
•	Street address, if available, or other description		☐ Duplex or multi-unit building		ve Claims Secured by Property.  he Current value of the
			_	Current value of the entire property?	
	City State	State ZIP Code	☐ Condominium or cooperative	\$	portion you own? \$
•	City	State ZIP Code	☐ Manufactured or mobile home	\$	portion you own?
	City	State ZIP Code		\$	
	City	State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property	\$	
	City	State ZIP Code	<ul><li>☐ Manufactured or mobile home</li><li>☐ Land</li><li>☐ Investment property</li><li>☐ Timeshare</li></ul>		<u> </u>
	City	State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property	Describe the natu	stre of your ownership interest ole, tenancy by the entireties, o
	City	State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other  Who has an interest in the property? Check one ☐ Debtor 1 only	Describe the natu	\$ ire of your ownership interest ile, tenancy by the entireties, o
	County	State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other  Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	Describe the natu (such as fee simp a life estate), if kn	sire of your ownership interest le, tenancy by the entireties, o own.
		State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other  Who has an interest in the property? Check one ☐ Debtor 1 only	Describe the natu (such as fee simp a life estate), if kn	see of your ownership interest ele, tenancy by the entireties, oown.
		State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other  Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Describe the natu (such as fee simp a life estate), if kn	see of your ownership interest ele, tenancy by the entireties, oown.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt	or 1 <b>K</b>	aren L. Ca	rter		Case numbe	r (if known)	
3. <b>C</b> a	ırs, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles			
	No						
	Yes						
3.1	Make:	Chevrole	t	Who has an interest in the property? Check	the an	nount of any secur	laims or exemptions. Put ed claims on Schedule D:
	Model:	Equinox		Debtor 1 only	Credit	ors Who Have Cla	ims Secured by Property.
	Year:	2015	04 000	Debtor 2 only		nt value of the	Current value of the
		nate mileage: ormation:	81,000	Debtor 1 and Debtor 2 only	entire	property?	portion you own?
	Other in	omation.		At least one of the debtors and another			
				☐ Check if this is community property (see instructions)		\$10,000.00	\$10,000.00
5 <b>A</b>				rn for all of your entries from Part 2, incluthat number here			\$10,000.00
Part 3	3: Descri	be Your Perso	nal and Household It	ems			
Do y	ou own c	r have any l	egal or equitable in	terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
E		<b>goods and f</b> Major appliar	furnishings aces, furniture, linens	, china, kitchenware			ciains of exemptions.
	Yes. De	scribe					
			Bedroom furnis	hings			\$300.00
E.		Televisions a including cell		eo, stereo, and digital equipment; computer nedia players, games	rs, printers, scanne	rs; music collect	
			(1) television				\$150.00
			Tablet				\$100.00
E.	xamples:	other collecti	figurines; paintings, ons, memorabilia, co		other art objects; s	tamp, coin, or ba	seball card collections;
			CD & DAD colle	CHOH			φυ.υυ

D	ebtor 1	Karen L. Carter		Ca	ise number (if known)	
9.		ent for sports and hobbles: Sports, photographic, musical instruments		obby equipment; bicycles, pool tables, gol	f clubs, skis; canoes a	nd kayaks; carpentry tools;
	■ No □ Yes.	Describe				
10	. <b>Firearr</b> Examp	<b>ns</b> ples: Pistols, rifles, shotgu	uns, ammunition, and	related equipment		
	■ No □ Yes.	Describe				
11	. <b>Clothe</b> Examµ □ No		ırs, leather coats, desi	gner wear, shoes, accessories		
	Yes.	Describe				
		Wom	en's clothing and	shoes		\$1,000.00
12	□ No		ostume jewelry, engag	ement rings, wedding rings, heirloom jewe	elry, watches, gems, go	ld, silver
		Wom	en's jewelry			\$200.00
14	. Any ot	Describe  ther personal and house Give specific information	-	oot already list, including any health aid	s you did not list	
15			•	rrt 3, including any entries for pages yo	u have attached	\$1,800.00
Pa	art 4: De	scribe Your Financial Asse	ets			
D	o you ov	vn or have any legal or	equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	oles: Money you have in y		me, in a safe deposit box, and on hand wh	en you file your petition	n
					Cash	\$10.00
17				unts; certificates of deposit; shares in cred with the same institution, list each.	it unions, brokerage ho	ouses, and other similar
	_			Institution name:		
		17.1.	Checkings and Savings	Bank of America		\$12.00
			-			

D	eptor 1	Karen L. Carter	Case number (if known)	
18.		mutual funds, or publicly traded stocks //es: Bond funds, investment accounts with brokera	ge firms, money market accounts	
	■ No			
	☐ Yes	Institution or issuer name	92	
19.	joint v		d and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No	Observation of the later and the second the second		
	⊔ Yes.	Give specific information about them  Name of entity:	% of ownership:	
20.	Negoti Non-ne	ment and corporate bonds and other negotiable able instruments include personal checks, cashiers egotiable instruments are those you cannot transfer	' checks, promissory notes, and money orders.	
	■ No			
	⊔ Yes.	Give specific information about them		
		Issuer name:		
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b)	), thrift savings accounts, or other pension or profit-sharing plan	s
		_ist each account separately.		
	□ res.	Type of account:	Institution name:	
22.	Your s Examp	y deposits and prepayments nare of all unused deposits you have made so that les: Agreements with landlords, prepaid rent, public	you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies,	or others
	■ No		Institution name or individuals	
	☐ Yes.		Institution name or individual:	
23.	Annuit	es (A contract for a periodic payment of money to	you, either for life or for a number of years)	
	■ No			
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qualifi C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ed ABLE program, or under a qualified state tuition progra	m.
	Yes	Institution name and description. Sep	parately file the records of any interests.11 U.S.C. § 521(c):	
		403(B)		\$800.00
		401(K)		\$4,000.00
				. ,
25.	Trusts,	equitable or future interests in property (other	than anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and otles: Internet domain names, websites, proceeds from		
		Give specific information about them		
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperation	ve association holdings, liquor licenses, professional licenses	
		Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

D	ebtor 1	Karen L. Cart	ter	Case number (if known)	
28	. Tax ref	funds owed to yo	ou		
		Give specific infor	rmation about them, including whether you already	filed the returns and the tax years	
29		support ples: Past due or lu	ump sum alimony, spousal support, child support, r	maintenance, divorce settlement, property	settlement
		Give specific infor	rmation		
30			ne owes you ss, disability insurance payments, disability benefits aid loans you made to someone else	s, sick pay, vacation pay, workers' compen	sation, Social Security
		Give specific info	ormation		
31		sts in insurance p ples: Health, disab	policies vility, or life insurance; health savings account (HSA	a); credit, homeowner's, or renter's insuran	ce
	☐ Yes.	Name the insuran	nce company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32	If you		y that is due you from someone who has died y of a living trust, expect proceeds from a life insura	ance policy, or are currently entitled to rece	ive property because
	■ No □ Yes.	Give specific info	ormation		
33			rties, whether or not you have filed a lawsuit or mployment disputes, insurance claims, or rights to		
	☐ Yes.	Describe each cla	aim		
34	■ No	-	nliquidated claims of every nature, including co	ounterclaims of the debtor and rights to	set off claims
		Describe each cla			
35	■ No	nancial assets yo Give specific info	u did not already list		
36	6. <b>Add 1</b>	the dollar value o	of all of your entries from Part 4, including any e		\$4,822.00
				L	
		<u></u>	ss-Related Property You Own or Have an Interest In. L		
	No. Go	to Part 6.	gal or equitable interest in any business-related prope	rty?	
	☐ Yes. (	Go to line 38.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38	. Accou	nts receivable or	commissions you already earned		
	□ No □ Yes.	Describe			

Official Form 106A/B

Schedule A/B: Property

page 5

D	eptor 1	Karen L. Cari	<b>ter</b> Case number	(If Known)	
39			shings, and supplies ated computers, software, modems, printers, copiers, fax machines, rugs, telephon	nes, desks, chairs,	electronic devices
	□ No □ Yes.	Describe		-	
40	. Machir	nery, fixtures, eq	uipment, supplies you use in business, and tools of your trade	_	
	□ No	Describe			
	□ 163.	Describe		] _	
41	. Invent	tory			
	□ No □ Yes.	Describe		_	
42	Interes	ets in nartnershin	s or joint ventures	_	
72	□ No	nto in partiferonip	3 of joint ventures		
		Give specific info	rmation about them  Name of entity:  % of owners	ship: %	
	□ No.		lists, or other compilations sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
		□ No □ Yes. Describe			
44	□ No	usiness-related p	roperty you did not already list		
		·			
45			of all of your entries from Part 5, including any entries for pages you have atta number here		
Pa			nd Commercial Fishing-Related Property You Own or Have an Interest In. nterest in farmland, list it in Part 1.		
46			y legal or equitable interest in any farm- or commercial fishing-related prope	rty?	
	_	Go to Part 7.			
	<b>—</b> 165	. 50 to mie 47.		<b>p</b> o D	urrent value of the ortion you own? o not deduct secured aims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

Deb	tor 1	Karen L. Ca	arter		Case number (if known)	
г	l No					
48. <b>(</b>	crops—	either growin	g or harvested			
_	•					
	] No ] Voc. (	Give specific in	formation			
	res. c	sive specific in	ormation			
49. <b>F</b>	arm ar	nd fishina eau	ipment, implements, machinery, fixtures	and tools of trade		
			,,, , , , , , , , , , , , , , , ,	,		
	No					
L	l Yes					
	-					
50. <b>F</b>	·arm ar	nd fishing sup	plies, chemicals, and feed			
	<b>l</b> No					
	<b>]</b> Yes					
51.	Any fari	m- and comm	ercial fishing-related property you did no	ot already list		
г	l No					
		Give specific in	formation			
		•				
<b>5</b> 0	A al al 41e	مم طمالمه بیماریم	of all of your entries from Dort 6 includ	ing only ontring for non	oo way baya attaabad	
52.	for Pa	rt 6. Write that	e of all of your entries from Part 6, includ	ing any entries for pay	jes you nave allached	
Part	7:	Describe All P	roperty You Own or Have an Interest in That Y	ou Did Not List Above		
<b></b>		h a a a th a n mu		-40		
			operty of any kind you did not already lis kets, country club membership	ot f		
	No					
	Yes. C	Give specific in	formation			
54.	Add th	ne dollar value	of all of your entries from Part 7. Write t	that number here		\$0.00
Part	8:	List the Totals of	of Each Part of this Form			
55.	Part 1:	: Total real est	tate, line 2			\$0.00
56.	Part 2:	: Total vehicle	s, line 5	\$10,000.00		· ·
57.	Part 3:	: Total person	al and household items, line 15	\$1,800.00		
58.	Part 4:	: Total financi	al assets, line 36	\$4,822.00		
59.	Part 5:	: Total busine	ss-related property, line 45	\$0.00		
60.	Part 6:	: Total farm- a	nd fishing-related property, line 52	\$0.00		
61.	Part 7:	: Total other p	roperty not listed, line 54	+ \$0.00		
62.	Total r	nersonal prop	erty. Add lines 56 through 61	\$16,622.00	Copy personal property t	otal \$16,622.00
JL.	. Juli	- 3. Soniai piop		Ψ10,022.00	Jop, polocilal property t	Ψ10,022.00
63.	Total o	of all property	on Schedule A/B. Add line 55 + line 62			\$16,622.00
						·

Debtor 1	Karen L. Carter			
	First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	-
Case number				
(if known)				☐ Check if this is an

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
1. Whic	h set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	portion you own		ount of the exemption you claim	Specific laws that allow exemption					
				eck only one box for each exemption.						
	Bedroom furnishings Line from Schedule A/B: 6.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)					
	Ellie Holli Genedale A.D. G.1			100% of fair market value, up to any applicable statutory limit						
	(1) television Line from Schedule A/B: 7.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)					
	Line nom denedate AVE. TT			100% of fair market value, up to any applicable statutory limit						
	Tablet Line from Schedule A/B: 7.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)					
	Line IIIIII Schedule PVD. 1.2			100% of fair market value, up to any applicable statutory limit						
	CD & DVD collection Line from Schedule A/B: 8.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)					
	Line IIIIII Schedule PAD. 0.1			100% of fair market value, up to any applicable statutory limit						
	Women's clothing and shoes Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)					
	Line nom Schedule PVD. 11.1			100% of fair market value, up to any applicable statutory limit						

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Women's jewelry Line from Schedule A/B: 12.1		\$200.00	\$200.00		11 U.S.C. § 522(d)(4)	
	Ellio II Gonogalo 702. 1211			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1		\$10.00		\$10.00	11 U.S.C. § 522(d)(5)	
	Line IIoni Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit		
	Checkings and Savings: Bank of America	nk of \$12.00		\$12.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	<b>403(B)</b> Line from <i>Schedule A/B</i> : <b>24.1</b>	\$800.00		\$800.00	11 U.S.C. § 522(d)(10)(E)	
	Line II on Schedule AVB. 24.1			100% of fair market value, up to any applicable statutory limit		
	<b>401(K)</b> Line from <i>Schedule A/B</i> : <b>24.2</b>	\$4,000.00		\$4,000.00	11 U.S.C. § 522(d)(10)(E)	
Line from Scriedule A/B: 24.2				100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemple (Subject to adjustment on 4/01/22 and 6 miles).				led on or after the date of adjustme	nt.)	
	<ul><li>No</li><li>Yes. Did you acquire the property cover</li></ul>	red by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

				_	
Fill in this information to identify yo	our case:				
Debtor 1 Karen L. Carte	er				
First Name	Middle Name Last Nam	е		_	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	Α		_	
		C			
United States Bankruptcy Court for th	e: EASTERN DISTRICT OF MICHIGAN			_	
Case number					
(if known)				☐ Chec	k if this is an
				amer	nded filing
O#: -: -! F 400D					
Official Form 106D					
Schedule D: Creditor	s Who Have Claims Secu	red by Pr	opert	ty	12/15
	e. If two married people are filing together, both a t out, number the entries, and attach it to this for				
1. Do any creditors have claims secured	by your property?				
☐ No. Check this box and submit	this form to the court with your other schedule	s. You have not	hing else	to report on this form.	
Yes. Fill in all of the informatio	n below.				
Part 1: List All Secured Claims					
	s more than one secured claim, list the creditor sepa	Column A	4	Column B	Column C
for each claim. If more than one creditor h	s more than one secured daint, list the creditor sepa as a particular claim, list the other creditors in Part 2. etical order according to the creditor's name.	As Amount Do not do		Value of collateral that supports this claim	Unsecured portion If any
2.1 Credit Acceptance Corporation	Describe the property that secures the claim:	\$18	111.00	\$10,000.00	\$8,111.00
Creditor's Name	2015 Chevrolet Equinox 81,000				
05505 W 40 MH B I	miles				
25505 W. 12 Mile Rd., #2650	As of the date you file, the claim is: Check all th	l at			
Southfield, MI 48034	apply. ☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	■ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lie	n)			
At least one of the debtors and another	9				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number		_		
Add the dellessed of the second	Only and Annahia and an William Co.		¢40.4	44.00	
-	Column A on this page. Write that number here: d the dollar value totals from all pages.		\$18,1		
Write that number here:	The second secon		\$18,1	11.00	
Part 2: List Others to Be Notified	for a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in this inform	nation to identify your case:					
Debtor 1	Karen L. Carter First Name	Middle Name Las	st Name			
Debtor 2	riistivanie	mode Name Las	r valle			
(Spouse if, filing)	First Name	Middle Name Las	t Name			
United States Ba	nkruptcy Court for the: EAST	ERN DISTRICT OF MICHIGA	N			
Case number						
(if known)					_	k if this is an
					amen	ded filing
Official Forn	n 106E/F					
Schedule E	F: Creditors Who H	ave Unsecured Cla	aims			12/15
any executory control Schedule G: Execu Schedule D: Credit left. Attach the Corname and case nui		Ild result in a claim. Also list exises (Official Form 106G). Do not Property. If more space is neede have no information to report in	ecutory contracts on include any creditor ed, copy the Part you	Schedule A/B: Pr s with partially se need, fill it out, n	operty (Official Fo cured claims that umber the entries	orm 106A/B) and on are listed in in the boxes on the
	II of Your PRIORITY Unsecure					
_ ′	ors have priority unsecured claims	against you?				
■ No. Go to F □ Yes.	Part 2.					
2. List all of y listed, ident much as po	your priority unsecured claims. If a ify what type of claim it is. If a claim hassible, list the claims in alphabetical rt 1. If more than one creditor holds a	as both priority and nonpriority amorder according to the creditor's na	nounts, list that claim he name. If you have more	ere and show both	priority and nonprio	ority amounts. As
(For an exp	lanation of each type of claim, see th	e instructions for this form in the in	struction booklet.)	Total claim	Priority	Nonpriority
				Total Claim	amount	amount
2.1.						
		Last 4 digits of account nu	mber			
Priority Cr	editor's Name	When was the debt incurred				_
Number S	Street City State Zip Code	As of the date you file, the o	claim is: Check all that	apply		
Who incurre	d the debt? Check one.	Unliquidated				
Debtor 1 o	only	☐ Disputed				
Debtor 2 of						
	and Debtor 2 only	Type of PRIORITY unsecure	ad alaim.			
_	ne of the debtors and another this claim is for a community debt					
	subject to offset?	_				
□ No		☐ Taxes and certain other d☐ Claims for death or person				
☐ No		_				
□ res		Other. Specify				_
Part 2: List A	II of Your NONPRIORITY Unse	cured Claims				
	ors have nonpriority unsecured cla					
	ve nothing to report in this part. Subr		other schedules.			
Yes.		,				
4. List all of you unsecured claim	r nonpriority unsecured claims in to m, list the creditor separately for each tor holds a particular claim, list the otl	n claim. For each claim listed, iden	tify what type of claim i	t is. Do not list clai	ms already include	d in Part 1. If more

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 27

Total claim

1 Karen L. Carter	Case number (if known)	
AcceptanceNOW Nonpriority Creditor's Name	Last 4 digits of account number	\$1,230.0
5501 Headquarters Plano, TX 75024	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify collections	
Ace Cash	Last 4 digits of account number	\$786.6
Nonpriority Creditor's Name <b>804 W Highland Ave.</b>	When was the debt incurred?	
San Bernardino, CA 92405  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify payday loan	
ACS Inc.	Last 4 digits of account number 0215	\$3,341.8
Nonpriority Creditor's Name		
online payday loan lender	When was the debt incurred? 2/20/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?		
Is the claim subject to offset?  ■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Debto	Karen L. Carter		Case number (if known)	
1.4	Advance America Cash Advance  Nonpriority Creditor's Name 19655 Mound Detroit, MI 48234	Last 4 digits of account number  When was the debt incurred?		\$1,224.98
	Detroit, MI 48234  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify payday loa	<u>n</u>	
1.5	AT&T	Last 4 digits of account number	3340	Unknown
	Nonpriority Creditor's Name PO Box 8212 Aurora, IL 60572-8212	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify <b>collections</b>		
.6	Axcess Financial	Last 4 digits of account number	5734	\$565.45
	Nonpriority Creditor's Name 100 Commercial Drive Fairfield, OH 45014	When was the debt incurred?	11/17/14	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other, Specify collections		
	Yes	Other. Specify collections		

Capital One Bank	Last 4 digits of account number		\$863.09
Nonpriority Creditor's Name 11013 W. Broad Street	When was the debt incurred?		φουσ.υσ
Glen Allen, VA 23060  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify collections	3	
Care Credit/Synchrony Bank	Last 4 digits of account number	9766	\$915.66
P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u ciaiii.	
☐ Check if this claim is for a community	_	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	aration agreement of arverse that you do not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify collections	3	
Cash Advance, Inc.	Last 4 digits of account number	8001	Unknown
Nonpriority Creditor's Name 25954 Eden Landing Rd. Hayward, CA 94545	When was the debt incurred?	10/07/15	
Number Street City State Zip Code  Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
⊒ Yes	■ Other. Specify payday adv		

Karen L. Carter	Case number (if known)	
Cash Net USA	Last 4 digits of account number 5765	\$985.3
Nonpriority Creditor's Name 175 West Jackson Blvd. Ste 1000	When was the debt incurred? 04/01/16	
Chicago,, IL		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify payday advance loan	
CASHCALL Inc.	Last 4 digits of account number	\$4,214.8
Nonpriority Creditor's Name 1600 S Douglass Rd. Anaheim, CA 92806	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify payday advance loan	
CB Indigo/GF	Last 4 digits of account number 0004	\$690.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ000.0
19315 West 10 Mile Rd. Southfield, MI 48075	When was the debt incurred? 8/23/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify collections	

Karen L. Carter		Case number (if known)	
Charles Kissel, PC	Last 4 digits of account number	2918	\$4.8
Nonpriority Creditor's Name 29433 Ryan Rd.	When was the debt incurred?	12/16/16	
Warren, MI 48092-2203 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify medical co	llections	
CHASE BANK	Last 4 digits of account number	1544	\$698.20
Nonpriority Creditor's Name PO BOX 901076	When was the debt incurred?		·
Fort Worth, TX 76101  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify unsecured	line of credit	
Check N Go	Last 4 digits of account number	5734	\$565.4
Nonpriority Creditor's Name 25274 Greenfield Rd. Oak Park, MI 48237	When was the debt incurred?	4/28/15	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify payday adv	vance Ioan	

Karen L. Carter	Case number (if known)	
Citizens Bank	Last 4 digits of account number 1330	\$297.6°
Nonpriority Creditor's Name 775 South Grove Street Ypsilanti, MI 48198-6304	When was the debt incurred? 07/26/17	_
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify collections	_
Comcast Cable	Last 4 digits of account number	\$107.35
Nonpriority Creditor's Name P.O.Box 3006	When was the debt incurred?	_
Southeastern, PA 19398 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the diam is. Oncok an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify collections	_
Comerica Bank	Last 4 digits of account number	\$242.34
Nonpriority Creditor's Name P.O.Box 75000 Detroit, MI 48275	When was the debt incurred?	_
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify collections	

Karen L. Carter	Case number (if known)	· · · · ·
Congress Collection	Last 4 digits of account number 5982	\$164.0
Nonpriority Creditor's Name		
24901 Northwestern Highway	When was the debt incurred? 04/02/18	
Street		
Southfield, MI 48075	A of the determination the plains in Observation that could	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divoreport as priority claims	orce that you did not
No	$\square$ Debts to pension or profit-sharing plans, and other simila	r debts
□Yes	Other. Specify medical collections	
Conserve	Last 4 digits of account number	\$4,343.6
Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 190 Fairport, NY 14450	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divoreport as priority claims	orce that you did not
No	Debts to pension or profit-sharing plans, and other simila	r debts
Yes	Other. Specify collections	
Convergent Outsourcing	Last 4 digits of account number 5192	\$210.0
Nonpriority Creditor's Name 800 SW 39th St.	When was the debt incurred? 7/18/16	
Renton, WA 98057  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divoreport as priority claims	•
No	$\square$ Debts to pension or profit-sharing plans, and other similar	r debts
☐ Yes	■ Other. Specify collections	

Credit Management	Last 4 digits of account number 8672	\$107.0
lonpriority Creditor's Name 6080 Tennyson Pkwy. Ste. Plano, TX 75024	When was the debt incurred?	_
lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\operatorname{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify collections	_
Credit One Bank	Last 4 digits of account number 2953	\$536.2
Ionpriority Creditor's Name	<del></del>	
P.O. Box 98872	When was the debt incurred? 8/07/13	
Las Vegas, NV 89193  Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	Obligations arising out of a separation agreement or divorce that you did no	t
s the claim subject to offset?  ■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify     unsecured line of credit	
	<u> </u>	<u> </u>
lash of cash	Last 4 digits of account number	\$480.0
lonpriority Creditor's Name PO Box 1469 (ahnawake, QU	When was the debt incurred?	
lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
- 110	Jeans, and and and	

DirectTV	Last 4 digits of account number 5971	\$137
Nonpriority Creditor's Name PO Box 6414	When was the debt incurred?	
Carol Stream, IL 60197-6414	- Assistative to the district of the district of	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Поли	
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify collections	
Diversified Consultants, Inc.	Last 4 digits of account number	Unkno
Nonpriority Creditor's Name		
PO Box 551268	When was the debt incurred? 1/21/15	
Jacksonville, FL 32255-1268  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify <b>collections</b>	
Dr. L. Reynolds Associates, P.C.	Last 4 digits of account number	\$75
Nonpriority Creditor's Name 24500 Northwestern Hwy. Southfield, MI 48075	When was the debt incurred? 10/25/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset? ■	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify medical collections	

Karen L. Carter	Case number (if known)	
DTE	Last 4 digits of account number	\$450.0
Nonpriority Creditor's Name 2000 Third St. Detroit, MI 48226	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify collections	
Enhanced Recovery Corp	Last 4 digits of account number 1488	\$600.
Nonpriority Creditor's Name 8014 Bayberry Rd. Jacksonville, FL 32256	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify collections	
		4050
Essential Concepts Consulting Nonpriority Creditor's Name	Last 4 digits of account number	\$650.
78 Dawson Village	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
— 110	France - France	

Karen L. Carter	<del></del>	
Fingerhut/Webbank	Last 4 digits of account number	\$759.00
Nonpriority Creditor's Name 6250 Ridgewood	When was the debt incurred? 12/11/12	
Saint Cloud, MN 56303  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify collections	
First Bank of Deleware	Last 4 digits of account number 2784	\$965.28
Nonpriority Creditor's Name P.O. Box 37727 Philadelphia, PA 19101	When was the debt incurred? 08/28/14	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify unsecured line of credit	
Golden Valley Lending	Last 4 digits of account number 7546	\$300.00
Nonpriority Creditor's Name 635 East Hwy 20, E Upper Lake, CA 95485	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify payday advance loan	

Karen L. Carter	Case number (if known)	
Grand River Family Denistry	Last 4 digits of account number 9600	\$118.4
Nonpriority Creditor's Name PO Box 53246 Livonia, MI 48153-2436	When was the debt incurred?	-
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical collections	_
Harvest Moon	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name  8 Crestwood Rd.	When was the debt incurred?	-
Boulevard, CA 91905  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	······································	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify payday advance Loan	_
Heart and Vascular, Consultants	Last 4 digits of account number 9308	\$49.9
Nonpriority Creditor's Name 4160 John R.	When was the debt incurred? 03/13/17	
Detroit, MI 48201-2014	When was the dest incurred:	_
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	

		*
Henry Ford Health System	Last 4 digits of account number 6633	\$255.00
Nonpriority Creditor's Name P.O. Box 553920 Detroit, MI 48255-3920 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? 6/17/19	
	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical collections	
Henry Health System Nonpriority Creditor's Name	Last 4 digits of account number 1918	\$250.00
P.O. Box 550115 Detroit. MI 48255	When was the debt incurred? 7/12/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify     medical collections	
Unation to a National Book	0004	
Huntington National Bank Nonpriority Creditor's Name	Last 4 digits of account number 0061	\$490.01
PO Box 1558	When was the debt incurred?	
Columbus, OH 43216-1558  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify unsecured line of credit	

Hutzel Womens Hospital	Last 4 digits of account number	8153	\$7.2
Nonpriority Creditor's Name 3980 John R Detroit, MI 48201	When was the debt incurred?	1/13/17	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify medical co	llections	
Hutzel Womens Hospital	Last 4 digits of account number	8153	\$20.00
Nonpriority Creditor's Name 3980 John R Detroit, MI 48201	When was the debt incurred?	10/24/16	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify medical co	llections	
Hydra Financial Limited Fund I	Last 4 digits of account number		Unknowr
Nonpriority Creditor's Name	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify		

Karen L. Carter	Case number (if known)	
Indigo - Celtic Bank	Last 4 digits of account number	\$690.0
Nonpriority Creditor's Name PO 4499	When was the debt incurred?	
Beaverton, OR 97076	- Acceptate the confined contracts for a linear contracts	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify unsecured line of credit	
Internal Revenue Service	Last 4 digits of account number	\$4,273.5
Nonpriority Creditor's Name		<b>*</b> 1,21 511
P.O. Box 804527	When was the debt incurred?	
Cincinnati, OH 45280-4527  Number Street City State Zip Code	- Acceptate to the control of the co	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<u> </u>		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify federal "16" assessed taxes	
LaSalle Recovery Bureau, LLC	Last 4 digits of account number 1213	\$661.2
Nonpriority Creditor's Name		<b>400</b>
PO Box 3081 Niagara Falls, NY 14304	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify payday loan	

J Ross and Associates	Last 4 digits of account number 6219	\$250
Nonpriority Creditor's Name	Last 4 digits of account number 6219	φ230
6360 W. Jackson Road Ann Arbor, MI 48103	When was the debt incurred? 07/03/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify collections	
_TS Management	Last 4 digits of account number	\$1,450
Nonpriority Creditor's Name	When was the debt incurred?	-
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the stant is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify collections	
Massey's		\$212
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ212
P.O. Box 8959	When was the debt incurred?	
Madison, WI 53708  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify unsecured line of credit	

Karen L. Carter	Case number (if known)				
Merrick Bank	Last 4 digits of account number	2061	\$1,114.0		
Nonpriority Creditor's Name P.O. Box 5000	When was the debt incurred?	03/16			
Draper, UT 84020 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
At least one of the debtors and another	Student loans	a Ciaiiii.			
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other Specify unsecured	line of credit			
MMCB	Last 4 digits of account number	8160	Unknow		
Nonpriority Creditor's Name PO Box 130	When was the debt incurred?	10/20/16			
Saint Johns, MI 48879-0130  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	7.0 0 uuto you,	or o			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt	☐ Student loans				
ls the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify collections				
MoneyLion	Last 4 digits of account number	5677	\$516.8		
Nonpriority Creditor's Name PO Box 1547	When was the debt incurred?	02/08/18			
Sandy, UT 84091-1547 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.	,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify payday loan				

Karen L. Carter		Case number (if known)			
National Credit Adjusters	Last 4 digits of account number	1095	\$516.00		
Nonpriority Creditor's Name 327 W. 4th Ave. Hutchinson, KS 67501	When was the debt incurred?	12/11/18			
Number Street City State Zip Code	As of the date you file, the claim i				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only Unliquidated					
Debtor 1 and Debtor 2 only	r 1 and Debtor 2 only				
At least one of the debtors and another	_ '				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	Other. Specify collections				
Penn Credit Corporation	Last 4 digits of account number	2808	\$603.96		
Nonpriority Creditor's Name	When was the debt incurred?	02/06/15			
PO Box 988		02/00/10			
(800) 900-1380					
Harrisburg, PA 17108-0988 Number Street City State Zip Code	As of the date you file, the claim i	is: Chack all that apply			
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арргу			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ At least one of the debtors and another  ☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐Yes	Other. Specify collections				
PNC Bank	Last 4 digits of account number	7169	\$561.70		
Nonpriority Creditor's Name 2730 Liberty Avenue	When was the debt incurred?	03/04/16	<b>, , , , , , , , , , , , , , , , , , , </b>		
Pittsburgh, PA 15222 Number Street City State Zip Code	As of the date you file, the claim i	is: Chook all that apply			
Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
<b>■</b>	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
No	Debts to perision of profit sharin	g plane, and other ourman doore			

Portfolio Recovery Associates	Last 4 digits of account number	2025	\$407	
Nonpriority Creditor's Name 120 Corporate Blvd	When was the debt incurred?	06/08/19		
Ste. 100 Norfolk, VA 23502				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	Other. Specify collections	<u> </u>		
Portfolio Recovery Associates Nonpriority Creditor's Name	Last 4 digits of account number	7805	\$863	
Riverside Commerce Center 120 Corporate Blvd Ste Norfolk, VA 23502-4962	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify collections	<u> </u>		
Progressive Nonpriority Creditor's Name	Last 4 digits of account number	1859	\$531	
256 W. Data Drive Draper, UT 84020	When was the debt incurred?	01/13/2016		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims			
■ No	•	or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify collections	<b>i</b>		

Progressive Leasing	Last 4 digits of account number	1859	\$531.
Nonpriority Creditor's Name 10619 South Jordan South Jordan, UT 84095	When was the debt incurred?	02/08/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify <b>collections</b>		
RadiantCash.com	Last 4 digits of account number	7600	Unknov
Nonpriority Creditor's Name	_		
P.O. Box 1183 Lac Du Flambeau, WI 54538	When was the debt incurred?	4/01/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	a plane, and other similar debts	
■ No □ Yes	Other. Specify payday adv		
RGS Financial Nonpriority Creditor's Name	Last 4 digits of account number	0286	\$161.
1700 Jay Ell Dr., Ste 200 Richardson, TX 75081	When was the debt incurred?	01/11/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other Specify collections		

Debt	or 1 Karen L. Carter	Case number (if known)	
4.6 1	Source Receivables Management	Last 4 digits of account number 2770	\$210.83
	Nonpriority Creditor's Name 4615 Dundas Drive Ste. 102	When was the debt incurred?	
	Greensboro, NC 27407  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify collections	
4.6 2	Star Group Loans	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify payday advance loans	
4.6 3	State Farm Insurance	Last 4 digits of account number	\$68,026.67
	Nonpriority Creditor's Name PO Box 2329 Bloomington, IL 61702-2329	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community		☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify lawsuit 14-004741	

Karen L. Carter	Case number (if known)			
Synb/Care Credit	Last 4 digits of account number	1918	Unknow	
Nonpriority Creditor's Name 6250 Ridgewood Rd.	When was the debt incurred?	09/28/15	<u> </u>	
Saint Cloud, MN 56303	_			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	Contingent			
Debtor 2 only	Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed	Later		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not		
-	report as priority claims			
■ No	☐ Debts to pension or profit-sharing			
Yes	Other. Specify collections	i		
TCF National Bank	Last 4 digits of account number	1348	\$160.	
Nonpriority Creditor's Name 17440 College Parkway 604-02-K	When was the debt incurred?	1/12/16		
604-02-K Livonia, MI 48152				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify <b>collections</b>			
TrueAccord	Last 4 digits of account number		\$1,268.	
Nonpriority Creditor's Name 303 2nd St.	When was the debt incurred?		<b>V</b> 1,200	
Ste 750 South				
San Francisco, CA 94107 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim	от спеск ан that арру		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	ng plans, and other similar debts		

Debto	r 1 Karen L. Carter	Case number (if known)	
4.6 7	University Physician Group	Last 4 digits of account number 5762	\$40.00
	Nonpriority Creditor's Name Drawer 1704 P.O. Box 79001 Detroit, MI 48279	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical collections	
4.6	Webbank/Fingerhut	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 6250 Ridgewood Rd. Saint Cloud, MN 56303	When was the debt incurred?	
Number Street City State Zip Code		As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Woodland Urgent Care	Last 4 digits of account number 9660	\$9.50
	Nonpriority Creditor's Name PO Box 32588 02	When was the debt incurred? 02/04/16	
Detroit, MI 48232-0588  Number Street City State Zip Code  Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical collections	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Karen L. Carter	Case number (if known)				
Name and Address 3rd Judicial Circuit Court 645 Griswold Ave. Detroit, MI 48226	On which entry in Part 1 or Part 2 did y Line 4.63 of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	41CK			
Name and Address Allied Interstate 435 Ford Rd Ste 800 Minneapolis, MN 55426	On which entry in Part 1 or Part 2 did y Line 4.8 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	9812			
Name and Address Apelles PO Box 1197 Westerville, OH 43086-1197	On which entry in Part 1 or Part 2 did y Line 4.39 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
,	Last 4 digits of account number				
Name and Address AT&T PO Box 8212 Aurora, IL 60572-8212	On which entry in Part 1 or Part 2 did y Line 4.52 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address Capital Management Services, LP 698 South Ogden Street Buffalo, NY 14206-2317	On which entry in Part 1 or Part 2 did Line 4.23 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Banaio, 111 14200 2011	Last 4 digits of account number				
Name and Address Client Services 3451 Harry S. Truman Blvd Saint Charles, MO 63301	On which entry in Part 1 or Part 2 did the Line 4.7 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Came Granes, me coor	Last 4 digits of account number	0992			
Name and Address Conserve PO Box 190 Fairport, NY 14450	On which entry in Part 1 or Part 2 did the Line 4.44 of (Check one):  Last 4 digits of account number	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims  3281			
Name and Address Convergent Outsourcing 800 SW 39th St. Renton, WA 98057	On which entry in Part 1 or Part 2 did the Line 4.25 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Kelitoli, WA 30037	Last 4 digits of account number				
Name and Address Convergent Outsourcing 800 SW 39th St.	On which entry in Part 1 or Part 2 did y Line 4.16 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Renton, WA 98057	Last 4 digits of account number	, , , , , , , , , , , , , , , , , , ,			
Name and Address Convergent Outsourcing	On which entry in Part 1 or Part 2 did y Line 4.48 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
800 SW 39th St. Renton, WA 98057	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Credit Corp. Solutions, Inc. 180 Election Road Ste. 200 Draper, UT 84020	On which entry in Part 1 or Part 2 did y Line <u><b>4.8</b></u> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address  Dynamic Recovery Solutions	On which entry in Part 1 or Part 2 did y Line 4.32 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims			

Official Form 106 E/F

Debtor 1 Karen L. Carter	Case number (if known)			
PO Box 25759 Greenville, SC 29616-0759	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number 3943			
Name and Address ERC 8014 Bayberry Rd.	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Jacksonville, FL 32256	Last 4 digits of account number			
Name and Address Hoffman Lawfirm & Associates, LLC	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.9</b> of (Check one):			
1000 Grand Canyon Pkwy.	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Deerfield, IL 60015	Last 4 digits of account number			
	<u> </u>			
Name and Address LJ Ross and Associates	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.38 of (Check one):			
6360 W. Jackson Road	Part 2: Creditors with Nonpriority Unsecured Claims			
Ann Arbor, MI 48103	Last 4 digits of account number			
	Last 4 digits of account number			
Name and Address National Credit Adjusters	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.42</b> of (Check one):			
327 W. 4th Ave.	Line 4.42 of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims			
Hutchinson, KS 67501				
	Last 4 digits of account number 1800			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Northland Group Inc. P.O. Box 390846	Line 4.7 of (Check one):			
Mail Code CA2	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Minneapolis, MN 55439				
	Last 4 digits of account number 5455			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
P.N. Financial PO Box 1431	Line 4.32 of (Check one):			
Skokie, IL 60076	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Professional Recovery Consultants 2700 Meridian Parkway	Line 4.48 of (Check one):			
Ste. 200	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Durham, NC 27713-2204				
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
RGS Financial PO Box 2149	Line 4.65 of (Check one):			
Addison, TX 75001-2149	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
SAR & Associates 8201 Peters Rd.	Line 4.47 of (Check one):			
Fort Lauderdale, FL 33324	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number 6130			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Sprint PCS	Line 4.61 of (Check one):			
P.O. Box 8077 London, KY 40742	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Steven O. Ashton	Line 4.63 of (Check one):			
380 North Main St.	■ Part 2: Creditors with Nonpriority Unsecured Claims			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 26 of 27

Debtor 1 Karen L. Carter		Case number (if known)		
Clawson, MI 48017-1525	Last 4 digits of account number	4741		
Name and Address	On which entry in Part 1 or Part 2 c	id you list the original creditor?		
The Integrun Group	Line <b>4.23</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
22000 Springbrook Ave. Ste. 202 Farmington, MI 48336		Part 2: Creditors with Nonpriority Unsecured Claims		
rannington, wii 40330	Last 4 digits of account number	4805		
Name and Address	On which entry in Part 1 or Part 2 c	id you list the original creditor?		
TRS Recovery Services, Inc.	Line <b>4.18</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
5251 Westheimer Houston, TX 77056		Part 2: Creditors with Nonpriority Unsecured Claims		
,	Last 4 digits of account number	0023		

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
otal	6f.	Student loans	6f.	\$ 0.00
laims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 110,761.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 110,761.89

Fill in this infor	mation to identify your	case:		
Debtor 1	Karen L. Carter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number				
(if known)				Check if this is an
				amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	
	•				

Fill in this	information to identify your	case:			
Debtor 1	Karen L. Carter				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT O	OF MICHIGAN		
Case numb	per				
(if known)					Check if this is an amended filing
Codebtors beople are ill it out, ar rour name  1. Do y  No Yes 2. With	filing together, both are equal number the entries in the and case number (if known you have any codebtors? (If	re also liable for any det ally responsible for sup boxes on the left. Attacl ). Answer every question you are filing a joint case,	plying correct informate the Additional Page to the Addition	tion. If more space is no o this page. On the top as a codebtor.  TY? (Community property	ate as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
☐ Yes  3. In Coluin line Form 1	2 again as a codebtor only	ors. Do not include your f that person is a guarar	spouse as a codebtor	sure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
-	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt
	,,, . <b>,,</b>			_	,
3.1	Name			_ ☐ Schedule D, line ☐ Schedule E/F, line	<del></del>
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
2.2				□ Cohodulo D. line	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street	•	<b>-</b> 15	_	
(	City	State	ZIP Code		

	in this information to identify the interest of the interest o	entify your ca aren L. Cai										
	otor 2						_					
	· •	Court for the	: EASTERN DISTRICT	OF MICHI	GAN							
Cas	se number			-				□ A		ed filing ent showin	ng postpetition	chapter
$\bigcirc$	fficial Form 10	061						_			ollowing date:	
	chedule I: Yo		ome					N	1M / DD/ \	/YYY		12/15
sup spo atta	plying correct informa use. If you are separat	tion. If you ed and you this form.	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, ith you, do	and your sp not include	ouse i infori	is livi natio	ng with on about	you, incl	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employm information.	ent		Debtor '	I				Debtor 2	2 or non-f	iling spouse	
	If you have more than attach a separate paginformation about add	e with	Employment status	■ Empl	oyed mployed				☐ Empl	oyed mployed		
	employers.		Occupation	Plebota								
	Include part-time, sea self-employed work.	sonal, or	Employer's name	Henry I	Ford Health	ı Sys	tems	<b>S</b>				
	Occupation may inclu or homemaker, if it ap		Employer's address	7800 West Outer Drive Detroit, MI 48235								
			How long employed to	here?	2.5 years				_			
Par	Give Details	About Mon	nthly Income									
	mate monthly income use unless you are sepa		ate you file this form. If	you have n	othing to repo	ort for	any I	ine, write	9 \$0 in the	space. In	clude your nor	n-filing
,	u or your non-filing spore e space, attach a separe		ore than one employer, co this form.	ombine the	information f	or all e	emplo	yers for	that perso	on on the li	ines below. If y	you need
								For Del	otor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)			2.	\$	1	,532.70	\$	N/A	
3.	Estimate and list mo	nthly overti	ime pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inco	me. Add lin	ne 2 + line 3.			4.	\$	1,53	32.70	\$	N/A	

Debtor 1	Karen L. Carter	Case number	er

				For	Debtor 1		r Debtor 2 or n-filing spou		
	Copy	r line 4 here	4.	\$	1,532.70	\$		N/A	
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	126.97	\$	1	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	1	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e.	\$	0.00	\$	1	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$		N/A	
	5g.	Union dues	5g.	\$_	0.00	\$_		N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$_	0.00	+ \$_		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	126.97	\$_		N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,405.73	\$_	N	N/A	
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	1	√A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	1	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	1	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	1	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	1	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_	0.00	\$_		N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$_	0.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		N/A	
10.	Calc	ulate monthly income. Add line 7 + line 9.	0. \$		1,405.73 + \$		N/A = \$	1.	405.73
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							,
11.	Include other	e all other regular contributions to the expenses that you list in Schedule and de contributions from an unmarried partner, members of your household, your of friends or relatives.  In the property of the p	depen		. •				0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					e. 12. \$_	1,	,405.73
								nbined	
13.	Do y	ou expect an increase or decrease within the year after you file this form?	•				moı	ntniy ii	ncome
	_	Yes. Explain:							
	_	I							

	in this informa	ation to identify yo	our case:						
Deb	tor 1	Karen L. Car	rter				if this is:		
Dah	tor 0						n amended filing		
	tor 2 ouse, if filing)							ving postpetition chapter the following date:	
``		runtcy Court for the	· FASTE	RN DISTRICT OF MICHIG	AN	_	MM / DD / YYYY		
	ca claics bank	ruptey Court for the	. LAOIL	THE PROPERTY OF MICHIGA	7.114	.,	MW17 007 1111		
	e numbe <b>r</b> nown)								
(II KI	ilowii)								
Οf	fficial Ec	orm 106J							
			Evnon	200				40/	4-
		J: Your			- filiman ta matham had			12/	15
info	rmation. If m		eded, atta	If two married people are ch another sheet to this to n.					
Par 1.	t 1: Descri	ribe Your House	ehold						
١.	No. Go to								
		es Debtor 2 live	in a senar	ate household?					
	□ 103. <b>D</b> 00		iii a sepaii	ate measement.					
	= ::		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Debto	or 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.						☐ Yes	
								□ No	
								☐ Yes	
								□ No	
					-			□ Yes □ No	
								□ NO □ Yes	
3.	Do your exp	penses include		No				□ res	
	expenses o	f people other t	han 🗖	Yes					
	yourself an	d your depende	nts?	163					
Par	t 2: Estim	nate Your Ongoi	ng Monthl	y Expenses					
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp					,
Incl	lude expense	es paid for with	non-cash	government assistance if	you know				
			d have inc	luded it on Schedule I: Y	our Income		Your exp	ansas	
(On	ficial Form 10	J6I.)					Tour exp	CIISCS	
4.		or home owners		ses for your residence. In	nclude first mortgage	4. \$		400.00	
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a. \$		0.00	
		erty, homeowner's	s, or renter	's insurance		4b. \$	_	0.00	
	•	•		ipkeep expenses		4c. \$		0.00	
		eowner's associa				4d. \$		0.00	
5.	Additional i	mortgage paym	ents for yo	our residence, such as hor	me equity loans	5. \$		0.00	

Official Form 106J

Official Form 106J Schedule J: Your Expenses

	ation to identify your	case:		
Debtor 1	Karen L. Carter			
D. I	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	EASTERN DISTRICT O	)F MICHIGAN	
Case number				
(if known)		<del></del>		☐ Check if this is an
				amended filing
Official Form  Declaration	-	ın Individual	Debtor's Sche	edules 12/15
If two married peo	ple are filing together	r, both are equally respo	nsible for supplying correct i	nformation.
Vou must file this	form whonever you fi	la bankruntev schodules	s or amondod echodulos. Mak	ring a false statement, concealing property, or
obtaining money of	or property by fraud in	n connection with a bank		es up to \$250,000, or imprisonment for up to 20
years, or both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.		
Sign I	Below			
Did you pay	or agree to pay some	one who is NOT an attor	rney to help you fill out bankr	uptcy forms?
■ No				
_	ame of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed wit	h this declaration and
X /s/ Karer	n L. Carter		X	
Karen L	. Carter of Debtor 1		Signature of Debto	or 2
Signature			-	
_	ıly 1, 2019		Date	
-	ıly 1, 2019		Date	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill in	this inform	ation to identify you	r case:			
Debto	r 1	Karen L. Carter				
	_	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name		
United	d States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
		,				
Case (if know	number n)				_	Check if this is an mended filing
	cial For		Affairs for Indivic	luals Eiling for B	ankruntav	4/19
Be as o	complete ar	nd accurate as possi	ble. If two married people a	re filing together, both are	equally responsible for sup additional pages, write you	
Part 1	: Give De	etails About Your Ma	nrital Status and Where You	Lived Before		
1. W	hat is your	current marital statu	ıs?			
	] Married					
	Not marri	ied				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	No					
		all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory	
-	_				ee, ronde, rraeimigien and r	,
-	I No I Yes Mak	se sure vou fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H)		
_	100. Mar	te sare you iii out oor	icadic II. Todi Codobiolo (Ci	noidi i omi roomj.		
Part 2	Explain	the Sources of You	r Income			
Fi	II in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
Г	] No					
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,651.58	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

De	ebtor 1	Ka	ren L. Ca	rter		Case	e number (if known)		
For last calen (January 1 to  For the calend (January 1 to  5. Did you re Include ind and other winnings.  List each so  No Yes.  Part 3: List  6. Are either No.									
	Did you receive any other inco Include income regardless of wh and other public benefit payment winnings. If you are filing a joint of List each source and the gross in  No Yes. Fill in the details.  Are either Debtor 1's or Debtor No. Neither Debtor 1 no individual primarily fo  During the 90 days be No. Go to line Yes. Debtor 1 or Debtor 2  During the 90 days be No. Go to line Subject to adjustm  Yes. Debtor 1 or Debtor 2  During the 90 days be List below paid that not include * Subject to adjustm  Yes. Debtor 1 or Debtor 2  During the 90 days be List below include p			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
				31, 2018 )	■ Wages, commissions, bonuses, tips	\$35,564.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
					■ Wages, commissions, bonuses, tips	\$41,533.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
	_		Fill in the d	etails.	Debtor 1		Debtor 2		
	•	No		-					
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)	
Pa	art 3:	List	Certain Pa	ayments You	Made Before You Filed for	Bankruptcy			
6.	_		Neither Dindividual  During the No.  Yes	ebtor 1 nor I primarily for a e 90 days before Go to line List below paid that controlled	Debtor 2 has primarily consular personal, family, or househoute you filed for bankruptcy, dig.  dig. d	umer debts. Consumer debts Id purpose."  Id you pay any creditor a total Id a total of \$6,825* or more in Its for domestic support oblighis bankruptcy case.	n one or more payments and the ations, such as child support a	ne total amount you nd alimony. Also, do	
	_		* Subject	to adjustmer	t on 4/01/22 and every 3 year	s after that for cases filed on	or after the date of adjustment		
		Yes.			or both have primarily consure you filed for bankruptcy, di		of \$600 or more?		
			■ No.	Go to line	7.				
			□ Yes	include pay			the total amount you paid that port and alimony. Also, do not i		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

**Total amount** 

paid

Amount you

still owe

**Creditor's Name and Address** 

**Dates of payment** 

Was this payment for ...

7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partne r more of their voting	rships of which you securities; and a	ou are a general ny managing ag	partner; corporations ent, including one for
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for the	his payment
8.	Within 1 year before you filed for bankrupto insider?		paid ments or transfer a	still owe	eccount of a del	ot that benefited an
	Include payments on debts guaranteed or cos  No	igned by an insider.				
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Pa	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  □ No ■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
					☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garnis	shed, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	l			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec.  No Yes. Fill in the details.		uding a bank or fin	ancial institution	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  ■ No □ Yes		rty in the possessi			it of creditors, a

Case number (if known)

Official Form 107

Debtor 1 Karen L. Carter

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1 Karen L. Carter			Case n	iumber (i	if known)	
Par	List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	су, с	lid you give any gifts with a total val	lue of	more th	an \$600 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrupt ■ No			ns with	n a total	value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cont					_	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al	Describe what you contributed			Dates you contributed	Value
Dor	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptoor gambling?  No Yes. Fill in the details.	y or	since you filed for bankruptcy, did y	you lo:	se anyth	ning because of the	ft, fire, other disaster,
	Describe the property you lost and how the loss occurred	clude	be any insurance coverage for the let the amount that insurance has paid. In the claims on line 33 of Schedule A/B:	Date of your loss	Value of property lost		
Par	17: List Certain Payments or Transfers			.,	,		
	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prepared	parir	ng a bankruptcy petition?				erty to anyone you
	No						
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any prop transferred	erty		Date payment or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you	rs o	r to make payments to your creditor		If pay o	r transfer any prope	erty to anyone who
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any prop transferred	erty		Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No  Yes. Fill in the details.	usin ade a	ess or financial affairs? as security (such as the granting of a s				
	Person Who Received Transfer Address		Description and value of property transferred	pay	yments	ny property or received or debts	Date transfer was made
	Person's relationship to you			pai	d in exc	cnange	
	-						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Debtor 1 Karen L. Carter Case number (if known)

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

	■ No  Yes. Fill in the details.	otection devices.)					
	Name of trust	Description and	Date Transfer w	as			
Pa	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	sit Boxes, and St	torage Unit	s		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the second seco	or other financial acco	unts; certificates	s of deposi		•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balan before closing trans	or
21.	Do you now have, or did you have within 1 yeash, or other valuables?  No Yes. Fill in the details.	year before you filed fo	or bankruptcy, a	ny safe dep	posit box or other depo	sitory for securities	,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit o  ■ No □ Yes. Fill in the details.	or place other than you	ur home within 1	year befor	re you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.  No Yes. Fill in the details.	meone else owns? Inc	lude any proper	ty you bor	rowed from, are storing	for, or hold in trus	Ċ
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Val	ue
Pa	rt 10: Give Details About Environmental Info	,					
For	the purpose of Part 10, the following definiti	ons apply:					
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	he air, land, soil, surfa	ce water, ground				or
	Site means any location, facility, or property to own, operate, or utilize it, including dispose		environmental	law, wheth	er you now own, operat	te, or utilize it or us	ed
	Hazardous material means anything an env hazardous material, pollutant, contaminant,		s as a hazardous	s waste, ha	zardous substance, tox	ic substance,	
Rep	ort all notices, releases, and proceedings the	at you know about, reç	gardless of wher	n they occu	ırred.		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Debtor 1 Karen L. Carter Case number (if known)

24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	nny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or C	connections to Any Business		
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	nny (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	art 12.		
	☐ Yes. Check all that apply above and fill i	n the details below for each business	<b>5.</b>	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	y, did you give a financial statement t	to anyone about your business? Inclu	de all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Karen L. Carter		Case number (if known)
Part 12: Sign Below		
are true and correct. I understand that	making a false statement, concealing prones up to \$250,000, or imprisonment for u	ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection p to 20 years, or both.
/s/ Karen L. Carter		
Karen L. Carter Signature of Debtor 1	Signature of Debtor 2	
Date July 1, 2019	Date	
Did you attach additional pages to You ■ No □ Yes	r Statement of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone v	who is not an attorney to help you fill out l	bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# United States Bankruptcy Court Eastern District of Michigan

In re	Karen	L. Carter		Case No.	
			Debtor(s)	Chapter 7	
		STATEMENT OF ATT PURSUANT TO F			
	The und	dersigned, pursuant to F.R.Bankr.P. 2016(b), states that			
l		dersigned is the attorney for the Debtor(s) in this case.			
)		mpensation paid or agreed to be paid by the Debtor(s) to	the undersioned	is: [Check one]	
-•	[ X ]	FLAT FEE	the undersigned	is. [check one]	
	A.	For legal services rendered in contemplation of and exclusive of the filing fee paid			
	B.	Prior to filing this statement, received			
	C.	The unpaid balance due and payable is			
	[]	RETAINER			
	A.	Amount of retainer received			
	B.	The undersigned shall bill against the retainer at an agreed to pay all Court approved fees and expenses			edule.] Debtor(s) have
3.	\$ <u>0.0</u>	of the filing fee has been paid.			
1.		n for the above-disclosed fee, I have agreed to render le not apply.]	gal service for all	aspects of the bankruptcy case, inc	luding: [Cross out any
	A.	Analysis of the debtor's financial situation, and rende bankruptcy;	_	-	ile a petition in
	B. C. <del>D.</del>	Preparation and filing of any petition, schedules, stat Representation of the debtor at the meeting of credito Representation of the debtor in adversary proceeding	ors and confirmati	on hearing, and any adjourned hear	ings thereof;
	E.	Reaffirmations;	s and other conte	ned summapley matters,	
	F. G.	Redemptions; Other:			
5.	By agre	eement with the debtor(s), the above-disclosed fee does Obtain any/all money previously garnished b attorney. Attorney Sebree shall bill a 25% co to the estate.	y creditor and/	or by the creditor's agent, rep	
5.	The sou A. B.	urce of payments to the undersigned was from:  Debtor(s)' earnings, wages, compe  Other (describe, including the iden		es performed	
7.		dersigned has not shared or agreed to share, with any of ation, any compensation paid or to be paid except as foll		han with members of the undersign	ned's law firm or
Dated:	July	1, 2019	_	/s/ Kenneth S. Sebree	
				Attorney for the Debtor(s) Kenneth S. Sebree P65523 Kenneth S. Sebree, P.C. Guardian Building 500 Griswold, Suite 3550 Detroit, MI 48226 (313) 963-9866 atty.sebree@sl	bcglobal.net
Agreed		aren L. Carter	-		
	Kare Debte	en L. Carter		Debtor	
	שטטע	O1		DUUM	

### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	15	filing fee	
\$7	'5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

#### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court Eastern District of Michigan**

		Karen L. Carter		
ıte:	July 1, 2019	/s/ Karen L. Carter		
abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and	l correct to the best	of his/her knowledge.
	VEI	RIFICATION OF CREDITOR	R MATRIX	
re	Karen L. Carter	Debtor(s)	Case No. Chapter	7

Signature of Debtor

3rd Judicial Circuit Court 645 Griswold Ave.
Detroit, MI 48226

AcceptanceNOW 5501 Headquarters Plano, TX 75024

Ace Cash 804 W Highland Ave. San Bernardino, CA 92405

ACS Inc. online payday loan lender

Advance America Cash Advance 19655 Mound Detroit, MI 48234 Detroit, MI 48234

Allied Interstate 435 Ford Rd Ste 800 Minneapolis, MN 55426

Apelles PO Box 1197 Westerville, OH 43086-1197

AT&T PO Box 8212 Aurora, IL 60572-8212

Axcess Financial 100 Commercial Drive Fairfield, OH 45014

Capital Management Services, LP 698 South Ogden Street Buffalo, NY 14206-2317

Capital One Bank 11013 W. Broad Street Glen Allen, VA 23060 Care Credit/Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

Cash Advance, Inc. 25954 Eden Landing Rd. Hayward, CA 94545

Cash Net USA 175 West Jackson Blvd. Ste 1000 Chicago,, IL

CASHCALL Inc. 1600 S Douglass Rd. Anaheim, CA 92806

CB Indigo/GF 19315 West 10 Mile Rd. Southfield, MI 48075

Charles Kissel, PC 29433 Ryan Rd. Warren, MI 48092-2203

CHASE BANK PO BOX 901076 Fort Worth, TX 76101

Check N Go 25274 Greenfield Rd. Oak Park, MI 48237

Citizens Bank 775 South Grove Street Ypsilanti, MI 48198-6304

Client Services 3451 Harry S. Truman Blvd Saint Charles, MO 63301

Comcast Cable P.O.Box 3006 Southeastern, PA 19398

Comerica Bank P.O.Box 75000 Detroit, MI 48275

Congress Collection 24901 Northwestern Highway Street Southfield, MI 48075

Conserve PO Box 190 Fairport, NY 14450

Convergent Outsourcing 800 SW 39th St. Renton, WA 98057

Credit Acceptance Corporation 25505 W. 12 Mile Rd., #2650 Southfield, MI 48034

Credit Corp. Solutions, Inc. 180 Election Road Ste. 200 Draper, UT 84020

Credit Management 6080 Tennyson Pkwy. Ste. Plano, TX 75024

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193

dash of cash PO Box 1469 Kahnawake, QU

DirectTV PO Box 6414 Carol Stream, IL 60197-6414

Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32255-1268 Dr. L. Reynolds Associates, P.C. 24500 Northwestern Hwy. Southfield, MI 48075

DTE 2000 Third St. Detroit, MI 48226

Dynamic Recovery Solutions PO Box 25759 Greenville, SC 29616-0759

Enhanced Recovery Corp 8014 Bayberry Rd. Jacksonville, FL 32256

ERC 8014 Bayberry Rd. Jacksonville, FL 32256

Essential Concepts Consulting 78 Dawson Village

Fingerhut/Webbank 6250 Ridgewood Saint Cloud, MN 56303

First Bank of Deleware P.O. Box 37727 Philadelphia, PA 19101

Golden Valley Lending 635 East Hwy 20, E Upper Lake, CA 95485

Grand River Family Denistry PO Box 53246 Livonia, MI 48153-2436

Harvest Moon 8 Crestwood Rd. Boulevard, CA 91905 Heart and Vascular, Consultants 4160 John R. Detroit, MI 48201-2014

Henry Ford Health System P.O. Box 553920 Detroit, MI 48255-3920

Henry Health System P.O. Box 550115 Detroit, MI 48255

Hoffman Lawfirm & Associates, LLC 1000 Grand Canyon Pkwy. Deerfield, IL 60015

Huntington National Bank PO Box 1558 Columbus, OH 43216-1558

Hutzel Womens Hospital 3980 John R Detroit, MI 48201

Hydra Financial Limited Fund I

Indigo - Celtic Bank PO 4499 Beaverton, OR 97076

Internal Revenue Service P.O. Box 804527 Cincinnati, OH 45280-4527

LaSalle Recovery Bureau, LLC PO Box 3081 Niagara Falls, NY 14304

LJ Ross and Associates 6360 W. Jackson Road Ann Arbor, MI 48103

LTS Management

Massey's P.O. Box 8959 Madison, WI 53708

Merrick Bank P.O. Box 5000 Draper, UT 84020

MMCB PO Box 130 Saint Johns, MI 48879-0130

MoneyLion PO Box 1547 Sandy, UT 84091-1547

National Credit Adjusters 327 W. 4th Ave. Hutchinson, KS 67501

Northland Group Inc. P.O. Box 390846 Mail Code CA2 Minneapolis, MN 55439

P.N. Financial PO Box 1431 Skokie, IL 60076

Penn Credit Corporation 916 S. 14th St. PO Box 988 (800) 900-1380 Harrisburg, PA 17108-0988

PNC Bank 2730 Liberty Avenue Pittsburgh, PA 15222 Portfolio Recovery Associates Riverside Commerce Center 120 Corporate Blvd Ste Norfolk, VA 23502-4962

Professional Recovery Consultants 2700 Meridian Parkway Ste. 200 Durham, NC 27713-2204

Progressive 256 W. Data Drive Draper, UT 84020

Progressive Leasing 10619 South Jordan South Jordan, UT 84095

RadiantCash.com
P.O. Box 1183
Lac Du Flambeau, WI 54538

RGS Financial PO Box 2149 Addison, TX 75001-2149

SAR & Associates 8201 Peters Rd. Fort Lauderdale, FL 33324

Source Receivables Management 4615 Dundas Drive Ste. 102 Greensboro, NC 27407

Sprint PCS P.O. Box 8077 London, KY 40742

Star Group Loans

State Farm Insurance PO Box 2329 Bloomington, IL 61702-2329 Steven O. Ashton 380 North Main St. Clawson, MI 48017-1525

Synb/Care Credit 6250 Ridgewood Rd. Saint Cloud, MN 56303

TCF National Bank 17440 College Parkway 604-02-K Livonia, MI 48152

The Integrun Group 22000 Springbrook Ave. Ste. 202 Farmington, MI 48336

TRS Recovery Services, Inc. 5251 Westheimer Houston, TX 77056

TrueAccord 303 2nd St. Ste 750 South San Francisco, CA 94107

University Physician Group Drawer 1704 P.O. Box 79001 Detroit, MI 48279

Webbank/Fingerhut 6250 Ridgewood Rd. Saint Cloud, MN 56303

Woodland Urgent Care PO Box 32588 02 Detroit, MI 48232-0588